

## **8. Abacavir Patch Testing and Rechallenge in Patients Labeled with Abacavir Hypersensitivity Syndrome**

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**Background:** Abacavir hypersensitivity syndrome (ABC HSR) is a potentially serious reaction occurring in 5% of those initiating the drug.

**Aim:** To examine the utility and safety of ABC patch testing (PT) and rechallenge in patients labeled with ABC HSR.

**Methods:** Patients with charts labeled as ABC HSR were identified and PT performed on consenting patients with petrolatum control, ABC 1% and ABC 10% and read at 24 hours. HLA-typing was validated between two sites on consenting patients. Patients with negative 24 hour patch tests (PT-), with a clinical need for ABC were rechallenged with ABC 30 mg p.o. followed in 1 hour by 300 mg p.o.

**Results:** 15 patients labeled as ABC HSR identified to-date returned for patch testing. 2/15 (13.3%) were patch test positive (PT+) and 13/15 (86.7%) were PT- . 6/13 (46.1%) PT- patients were rechallenged with abacavir and 6/6 (100%) have tolerated ABC for a median of 12.5 (2-36) weeks. For 11 patients where genetic testing was available HLA-B\*5701 was present in the 2/2 (100%) PT+ patients versus 0/9 patch PT- patients (p=0.018).

**Conclusions:** Clinical diagnosis of ABC HSR lacks precision as many more patients are labeled than have disease. PT is a potentially useful tool to identify true ABC HSR and appears to correlate well with genetic testing. The potential for safe rechallenge of PT- patients who have a clinical need for ABC is intriguing but should currently be performed under close observation in a hospital research setting.